

Complete and submit the application in duplicate.

FILED EFFECTIVE
2016 JAN 26 AM 9:08
SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:
Burley Physical Therapy and Rehabilitation, LLC
2. The date the certificate of organization was originally filed : January 31, 2000
3. The name of the limited liability company is amended to:
Burley Physical Therapy and Rehabilitation, LLC
4. The complete street and mailing addresses of the principal office is amended to:
1263 Bennett #2
(Street Address)
Burley, ID 83318
(Mailing Address, if different)
5. The mailing address for future correspondence (annual reports) is amended to:
1263 Bennett #2, Burley, ID 83318
(Address)
6. The name and address of the managers/members shall be amended as follows:

Add:	<input checked="" type="checkbox"/>	Delete:	<input type="checkbox"/>	<u>Nick Greenwell</u> <small>(Name)</small>	<u>1263 Bennett #2, Burley ID 83318</u> <small>(Address)</small>
Add:	<input type="checkbox"/>	Delete:	<input checked="" type="checkbox"/>	<u>Crae T. Berrett</u> <small>(Name)</small>	<u>PO Box 4223, Pocatello, ID 83205</u> <small>(Address)</small>
Add:	<input type="checkbox"/>	Delete:	<input type="checkbox"/>	<u></u> <small>(Name)</small>	<u></u> <small>(Address)</small>

7. Signature of a manager, member, or authorized person.

Printed Name: Nick Greenwell

Signature:

Printed Name: NIC

Signature:

Secretary of State use only

IDAHO SECRETARY OF STATE

01/26/2016 05:00

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